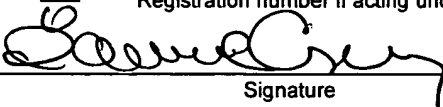




PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) <u>1e010</u>																								
Application Number <u>10/ 693,699</u>	Filed <u>10.27.2003</u>																									
For																										
Art Unit <u>3733</u>	Examiner <u>SWIGER, J.</u>																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="0" style="width:100%"><thead><tr><th></th><th style="text-align:center"><u>Fee</u></th><th style="text-align:center"><u>Small Entity Fee</u></th><th></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align:right">\$120</td><td style="text-align:right">\$60</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align:right">\$450</td><td style="text-align:right">\$225</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align:right">\$1020</td><td style="text-align:right">\$510</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align:right">\$1590</td><td style="text-align:right">\$795</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align:right">\$2160</td><td style="text-align:right">#306 <u>\$1080</u></td><td>\$ <u>1080</u></td></tr></tbody></table>				<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____	<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	#306 <u>\$1080</u>	\$ <u>1080</u>
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<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.																										
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.																										
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																										
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.																										
<input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____ I have enclosed a duplicate copy of this sheet.																										
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																										
06/27/2006 NNGUYEN1 00000140 10693699																										
I am the	<input type="checkbox"/> applicant/inventor.	01 FC:2255 1080.00 OP																								
	<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).																									
	<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>36,385</u>																									
	<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____																									
 _____ Signature		<u>06.26.2006</u> _____ Date																								
<u>LAWRENCE CRUZ</u> _____ Typed or printed name		<u>203 417 4508</u> _____ Telephone Number																								
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of _____ forms are submitted.</p>																										